

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 1 OF 3  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Generation Forward PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00578724	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M / D D / Y Y Y Y Y Y 01 / 27 / 2016	

Full Name of Payee <b>Fortune Media, Inc.</b>		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 07 / 2015	
Mailing Address 527 Avenue B		Amount 214041.00	
City Redondo Beach	State CA	Zip Code 90277-4183	Transaction ID : SE.4240
Purpose of Expenditure Television Advertisement Purchase	Category/ Type	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 07 / 2015	
Name of Federal Candidate MARTIN JOSEPH O'MALLEY		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		354940.71	

Full Name of Payee <b>Fortune Media, Inc.</b>		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 07 / 2015	
Mailing Address 527 Avenue B		Amount -3000.00	
City Redondo Beach	State CA	Zip Code 90277-4183	Transaction ID : SE.4407
Purpose of Expenditure Television Advertisement Refund	Category/ Type	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 07 / 2015	
Name of Federal Candidate MARTIN JOSEPH O'MALLEY		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		364440.71	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	211041.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Damian O'Doherty

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
01 / 28 / 2016

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 2 OF 3  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Generation Forward PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00578724	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
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Full Name of Payee <b>Dillon O'Brien</b>		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 07 / 2015	
Mailing Address 13251 Cheltenham Dr.		Amount 3000.00	
City Sherman Oaks	State CA	Zip Code 91423	Transaction ID : SE.4405
Purpose of Expenditure Media Production	Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 09 / 18 / 2015	
Name of Federal Candidate MARTIN JOSEPH O'MALLEY		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		140899.71	

Full Name of Payee <b>PRPR LLC</b>		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 08 / 12 / 2015	
Mailing Address 3401 Meadow Lane		Amount 4500.00	
City West Des Moines	State IA	Zip Code 50265	Transaction ID : SE.4244
Purpose of Expenditure Iowa Starting Line Online Advertising	Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 08 / 12 / 2015	
Name of Federal Candidate MARTIN JOSEPH O'MALLEY		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		137899.71	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	7500.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

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Damian O'Doherty

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
(Schedule E)PAGE 3 OF 3  
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		M M M / D D D / Y Y Y Y Y Y 01 / 27 / 2016	

Full Name of Payee <b>Siegel Strategies</b>		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 07 / 2015	
Mailing Address 1 Morton Square, Suite 3CW		Amount 11500.00	
City New York	State NY	Zip Code 10014	Transaction ID : SE.4241
Purpose of Expenditure Advertisement Production		Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 07 / 2015
Name of Federal Candidate MARTIN JOSEPH O'MALLEY		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought		366440.71	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>StoryFarm</b>		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 07 / 2015	
Mailing Address 1909 Thames Street Suite 201		Amount 1000.00	
City Baltimore	State MD	Zip Code 21231	Transaction ID : SE.4242
Purpose of Expenditure Advertisement Production		Category/ Type	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 07 / 2015
Name of Federal Candidate MARTIN JOSEPH O'MALLEY		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought		367440.71	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	12500.00
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	231041.00

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Damian O'Doherty

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Signature